#### **AMENDMENT**

It is agreed by and between the State of Vermont, Department of Vermont Health Access (hereafter called the "State") and Myers and Stauffer LC (hereafter called the "Contractor") that the contract on the subject of cost settlement and audit services for Vermont's Medicaid programs, effective February 1, 2013, is hereby amended effective February 1, 2015, as follows:

- 1. By deleting Section 3 (Maximum Amount) on page 1 of 38 and as previously amended, and substituting in lieu thereof the following Section 3:
  - **3.** <u>Maximum Amount.</u> In consideration of the services to be performed by Contract, the State agrees to pay Contractor, in accordance with the payment provisions specified in Attachment B, a sum not to exceed \$296,830.92.
- 2. By deleting on page 1 of 37, Section 4 (Contract Term) and as previously amended, and substituting in lieu thereof the following Section 4:
  - **4.** <u>Contract Term.</u> The period of the Contractor's performance shall begin on February 1, 2013 and end on January 30, 2016.
- 3. By deleting Section III (Audit Schedule: Listing of Facilities Subject to Audit) beginning on page 7 of 38 of the base agreement and as previously amended, and substituting in lieu thereof the Audit Schedule that is an attachment to this amendment beginning on page 3 of 11.
- 4. By adding to Attachment B beginning on page 21 of 38 of the base agreement and as previously amended, the Payment Schedule for February 1, 2015 January 31, 2016, which is an attachment to this amendment on page 7 of 11.
- 5. By deleting Item number 4 in Attachment B on page 23 of 38 of the base agreement and as previously amended, and substituting in lieu thereof the following item number 4:
  - 4. The total maximum amount payable under this contract shall not exceed \$296,830.92.
- 5. By deleting Attachment C (revised 11/7/2012) beginning on page 23 of 37 of the base agreement, and substituting in lieu thereof the Attachment C (revised 9/3/2014) which is an attachment to this amendment beginning on page 8 of 11.

### STATE OF VERMONT AMENDMENT TO PERSONAL SERVICES CONTRACT MYERS AND STAUFFER

**PAGE 2 OF 11 CONTRACT #23801 AMENDMENT #4** 

This amendment consists of 11 pages. Except as modified by this amendment and any previous amendments, all provisions of this contract, (#23801) dated February 1, 2013 shall remain unchanged and in full force and effect.

STATE OF VERMONT

**CONTRACTOR** 

DEPARTMENT OF VERMONT HEALTH ACCESS

DATE

MYERS AND STAUFFER LC

MARK LARSON, COMMISSIONER 312 Hurricane Lane, Suite 201 Williston, VT 05495-2087 Phone: 802-879-5901

Email: Mark.Larson@state.vt.us

JOHN KRAFT, CPA. CHFP - MEMBER DATE

400 Redland Court, Suite 300 Owing Mills, MD 21117 Phone: 410-581-4543

Email: JKraft@MSLC.com

## SECTION III Audit Schedule: Listing of Facilities Subject to Audit February 1, 2015 – January 31, 2015

## Listing of RHC - Hospital Based

Listing of Kite - Hospital Baseu							
Medicaid Provider #s	Medicare Provider #s	Name	Fiscal Year End	Medical	Dental	Pharmacy	Calendar 2015
0303989	0303989	Cottage Hospital	September 30th	X	n/a	n/a	Yes
0473981	0473981	Grace Cottage Hospital	September 30th	X	n/a	n/a	Yes
0303988	0303988	Littleton Hospital Association	September 30th	X	n/a	n/a	Yes
0473979, 0473980, 0473982, 0473987, 0473990	0473979, 0473980, 0473982, 0473987, 0473990	North County Hospital	September 30th	X	n/a	n/a	Yes
0473988, 0473989, 0473991	0473988, 0473989, 0473991	Northeastern Vermont Regional Hospital	September 30th	X	n/a	n/a	Yes
0303975, 0303976, 0303977, 0303991	0303975, 0303976, 0303977, 0303991	Weeks Medical Center	September 30th	X	n/a	n/a	Yes

**Listing of RHC - Free Standing** 

Medicaid	caid Medicare						
Provider #s	Provider #s	Name	Fiscal Year End	Medical	Dental	Pharmacy	Calendar 2015
0473830	0473830	Arlington Family Practice Terminated 11/23/2014	December 31st	X	n/a	n/a	Yes
0473824	0473824	Cold Hollow Family Practice	December 31st	X	n/a	n/a	Yes
0473829	0473829	Mountain Valley Medical Clinic	December 31st	X	n/a	n/a	Yes
0473814	0473814	Newport Pediatrics & Adolescent Medicine	December 31st	X	n/a	n/a	Yes
0473827	0473827	Ryder Brook Pediatrics	December 31st	X	n/a	n/a	Yes

# **Listing of FQHC Free Standing**

Medicaid Provider #	Medicare Provider #	Name	Fiscal Year End	Medical	Dental	Pharmacy	Calendar 2015
0301804	0301804	Ammonoosuc Community Health Care Services	June 30th	X	n/a	n/a	Yes
0471849	0471849	Battenkill Valley Health Center, Inc.		X			Yes
0000F02, 0001692	471800	Community Health Center of Burlington	April 30th	X	X	n/a	Yes
0471819, 0471820, 0471821, 0471823, 1017657	0471819, 0471820, 0471821, 0471823	Copley Professional Service Group	September 30th	X	X	n/a	Yes
0471846	0471846	Five Town Health Alliance, Inc. d/b/a Mountain Health Center	September 30th	X	n/a	n/a	Yes
0471850, 0471851, 0471852, 0471853, 0471854, 0471855	0471850, 0471851, 0471852, 0471853, 0471854, 0471855	Gifford Health Care Inc.	September 30th	X	n/a	n/a	Yes
0301819, 0471847	0301819, 0471847	Indian Stream Health Center, Inc.	December 31st	X	n/a	n/a	Yes
1012615	0471826	Little Rivers Health Care, Inc.	December 31st	X	n/a	n/a	Yes
0471817, 0471818, 1006333	0471817, 0471818	Northeast Washington County Community Health (d/b/a The Health Center of Plainfield)	June 30th	X	X	n/a	Yes

# Listing of FQHC Free Standing Continued

Medicaid Provider #s	Medicare Provider #s	Name	Fiscal Year End	Medical	Dental	Pharmacy	Calendar 2014
0471801, 0471802, 0471803, 0471804, 0471808, 1006335, 0007175	0471801, 0471802, 0471803, 0471804, 0471808	Northern Counties Health Care, Inc.	March 31st	X	X	X	Yes
0000F04, 0471811, 0471812, 0471813, 0471827, 0471848, 1006168, 1017783	0471807, 0471811, 0471812, 0471813, 0471827, 0471848,	Richford Health Center Inc. (NOTCH)	December 31st	X	X	n/a	Yes
0471814, 0471815, 0471816, 0471836, 0471842, 0471844, 1017612, 1013682	0471814, 0471815, 0471816, 0471836, 0471842, 0471844,	Community Health Centers of Rutland Region	December 31st	X	X	n/a	Yes
0301820, 0471828, 0471830, 0471833, 0471839, 0471845, 1018998, 1019101	0301820, 0471828, 0471830, 0471833, 0471839, 0471845,	Springfield Medical Care Systems, Inc.	September 30th	X	X	n/a	Yes

## Payment Schedule February 1, 2015- January 31, 2016

Provider Type	Task	Units	Estimated Hours Per Unit	Estimate Total Hours	Hourly Rate	Total Cost
, i	Cost Report					
RHC	Acceptance	5	1	5	\$81.03	\$405.15
	Final Cost					
RHC	Settlement	11	20	220	\$97.19	\$21,381.80
	Annual Rate					
RHC	Setting	5	1	5	\$91.03	\$455.15
FQHC	Cost Report					
	Acceptance	13	1	13	\$81.03	\$1,053.39
	Final Cost					
FQHC	Settlement	15	20	180	\$97.19	\$17,494.20
	Annual Rate					
FQHC	Setting	13	1	13	\$81.03	\$1,053.39
FQHC-	Quarterly					
Dental	Interim					
Clinic	Settlement	21	2	42	\$81.03	\$3,403.26
	Cost Report					
Hospitals	Acceptance	28	8	224	\$81.03	\$18,150.72
Hospital						
Based	Annual Rate					
FQHC/RHC	Setting	28	1	28	\$81.02	\$2,268.84
	General					
	Supervision and					
N/A	Admin.		1	140	\$150.22	\$21,030.80
	Special					
N/A	Projects		1	136	\$97.16	\$13,014.36
		1017		\$99,432.06		
To	tal Previous Year			\$196,916.38		
	Tota			\$296,830.92		

#### ATTACHMENT C STANDARD STATE PROVISIONS FOR CONTRACTS AND GRANTS

- 1. Entire Agreement: This Agreement, whether in the form of a Contract, State Funded Grant, or Federally Funded Grant, represents the entire agreement between the parties on the subject matter. All prior agreements, representations, statements, negotiations, and understandings shall have no effect.
- 2. Applicable Law: This Agreement will be governed by the laws of the State of Vermont.
- **3. Definitions:** For purposes of this Attachment, "Party" shall mean the Contractor, Grantee or Subrecipient, with whom the State of Vermont is executing this Agreement and consistent with the form of the Agreement.
- **4. Appropriations:** If this Agreement extends into more than one fiscal year of the State (July 1 to June 30), and if appropriations are insufficient to support this Agreement, the State may cancel at the end of the fiscal year, or otherwise upon the expiration of existing appropriation authority. In the case that this Agreement is a Grant that is funded in whole or in part by federal funds, and in the event federal funds become unavailable or reduced, the State may suspend or cancel this Grant immediately, and the State shall have no obligation to pay Subrecipient from State revenues.
- 5. No Employee Benefits For Party: The Party understands that the State will not provide any individual retirement benefits, group life insurance, group health and dental insurance, vacation or sick leave, workers compensation or other benefits or services available to State employees, nor will the state withhold any state or federal taxes except as required under applicable tax laws, which shall be determined in advance of execution of the Agreement. The Party understands that all tax returns required by the Internal Revenue Code and the State of Vermont, including but not limited to income, withholding, sales and use, and rooms and meals, must be filed by the Party, and information as to Agreement income will be provided by the State of Vermont to the Internal Revenue Service and the Vermont Department of Taxes.
- **6. Independence, Liability:** The Party will act in an independent capacity and not as officers or employees of the State.

The Party shall defend the State and its officers and employees against all claims or suits arising in whole or in part from any act or omission of the Party or of any agent of the Party. The State shall notify the Party in the event of any such claim or suit, and the Party shall immediately retain counsel and otherwise provide a complete defense against the entire claim or suit.

After a final judgment or settlement the Party may request recoupment of specific defense costs and may file suit in Washington Superior Court requesting recoupment. The Party shall be entitled to recoup costs only upon a showing that such costs were entirely unrelated to the defense of any claim arising from an act or omission of the Party.

The Party shall indemnify the State and its officers and employees in the event that the State, its officers or employees become legally obligated to pay any damages or losses arising from any act or omission of the Party.

**7. Insurance**: Before commencing work on this Agreement the Party must provide certificates of insurance to show that the following minimum coverages are in effect. It is the responsibility of the Party to maintain current certificates of insurance on file with the state through the term of the

Agreement. No warranty is made that the coverages and limits listed herein are adequate to cover and protect the interests of the Party for the Party's operations. These are solely minimums that have been established to protect the interests of the State.

<u>Workers Compensation</u>: With respect to all operations performed, the Party shall carry workers' compensation insurance in accordance with the laws of the State of Vermont.

<u>General Liability and Property Damage</u>: With respect to all operations performed under the contract, the Party shall carry general liability insurance having all major divisions of coverage including, but not limited to:

Premises - Operations
Products and Completed Operations
Personal Injury Liability
Contractual Liability

The policy shall be on an occurrence form and limits shall not be less than:

\$1,000,000 Per Occurrence

\$1,000,000 General Aggregate

\$1,000,000 Products/Completed Operations Aggregate

\$ 50,000 Fire/ Legal/Liability

Party shall name the State of Vermont and its officers and employees as additional insureds for liability arising out of this Agreement.

<u>Automotive Liability</u>: The Party shall carry automotive liability insurance covering all motor vehicles, including hired and non-owned coverage, used in connection with the Agreement. Limits of coverage shall not be less than: \$1,000,000 combined single limit.

Party shall name the State of Vermont and its officers and employees as additional insureds for liability arising out of this Agreement.

<u>Professional Liability</u>: Before commencing work on this Agreement and throughout the term of this Agreement, the Party shall procure and maintain professional liability insurance for any and all services performed under this Agreement, with minimum coverage of \$N/A per occurrence, and \$N/A aggregate.

- **8. Reliance by the State on Representations:** All payments by the State under this Agreement will be made in reliance upon the accuracy of all prior representations by the Party, including but not limited to bills, invoices, progress reports and other proofs of work.
- **9. Requirement to Have a Single Audit:** In the case that this Agreement is a Grant that is funded in whole or in part by federal funds, the Subrecipient will complete the Subrecipient Annual Report annually within 45 days after its fiscal year end, informing the State of Vermont whether or not a Single Audit is required for the prior fiscal year. If a Single Audit is required, the Subrecipient will submit a copy of the audit report to the granting Party within 9 months. If a single audit is not required, only the Subrecipient Annual Report is required.

For fiscal years ending before December 25, 2015, a Single Audit is required if the subrecipient expends \$500,000 or more in federal assistance during its fiscal year and must be conducted in

accordance with OMB Circular A-133. For fiscal years ending on or after December 25, 2015, a Single Audit is required if the subrecipient expends \$750,000 or more in federal assistance during its fiscal year and must be conducted in accordance with 2 CFR Chapter I, Chapter II, Part 200, Subpart F. The Subrecipient Annual Report is required to be submitted within 45 days, whether or not a Single Audit is required.

- 10. Records Available for Audit: The Party shall maintain all records pertaining to performance under this agreement. "Records" means any written or recorded information, regardless of physical form or characteristics, which is produced or acquired by the Party in the performance of this agreement. Records produced or acquired in a machine readable electronic format shall be maintained in that format. The records described shall be made available at reasonable times during the period of the Agreement and for three years thereafter or for any period required by law for inspection by any authorized representatives of the State or Federal Government. If any litigation, claim, or audit is started before the expiration of the three year period, the records shall be retained until all litigation, claims or audit findings involving the records have been resolved.
- 11. Fair Employment Practices and Americans with Disabilities Act: Party agrees to comply with the requirement of Title 21V.S.A. Chapter 5, Subchapter 6, relating to fair employment practices, to the full extent applicable. Party shall also ensure, to the full extent required by the Americans with Disabilities Act of 1990, as amended, that qualified individuals with disabilities receive equitable access to the services, programs, and activities provided by the Party under this Agreement. Party further agrees to include this provision in all subcontracts.
- **12. Set Off**: The State may set off any sums which the Party owes the State against any sums due the Party under this Agreement; provided, however, that any set off of amounts due the State of Vermont as taxes shall be in accordance with the procedures more specifically provided hereinafter.

#### 13. Taxes Due to the State:

- a. Party understands and acknowledges responsibility, if applicable, for compliance with State tax laws, including income tax withholding for employees performing services within the State, payment of use tax on property used within the State, corporate and/or personal income tax on income earned within the State.
- b. Party certifies under the pains and penalties of perjury that, as of the date the Agreement is signed, the Party is in good standing with respect to, or in full compliance with, a plan to pay any and all taxes due the State of Vermont.
- c. Party understands that final payment under this Agreement may be withheld if the Commissioner of Taxes determines that the Party is not in good standing with respect to or in full compliance with a plan to pay any and all taxes due to the State of Vermont.
- d. Party also understands the State may set off taxes (and related penalties, interest and fees) due to the State of Vermont, but only if the Party has failed to make an appeal within the time allowed by law, or an appeal has been taken and finally determined and the Party has no further legal recourse to contest the amounts due.
- **14. Child Support**: (Applicable if the Party is a natural person, not a corporation or partnership.) Party states that, as of the date the Agreement is signed, he/she:

- a. is not under any obligation to pay child support; or
- b. is under such an obligation and is in good standing with respect to that obligation; or
- c. has agreed to a payment plan with the Vermont Office of Child Support Services and is in full compliance with that plan.

Party makes this statement with regard to support owed to any and all children residing in Vermont. In addition, if the Party is a resident of Vermont, Party makes this statement with regard to support owed to any and all children residing in any other state or territory of the United States.

- **15. Sub-Agreements**: Party shall not assign, subcontract or subgrant the performance of this Agreement or any portion thereof to any other Party without the prior written approval of the State. Party also agrees to include in all subcontract or subgrant agreements a tax certification in accordance with paragraph 13 above.
- **16.** No Gifts or Gratuities: Party shall not give title or possession of any thing of substantial value (including property, currency, travel and/or education programs) to any officer or employee of the State during the term of this Agreement.
- **17. Copies**: All written reports prepared under this Agreement will be printed using both sides of the paper.
- **18. Certification Regarding Debarment:** Party certifies under pains and penalties of perjury that, as of the date that this Agreement is signed, neither Party nor Party's principals (officers, directors, owners, or partners) are presently debarred, suspended, proposed for debarment, declared ineligible or excluded from participation in federal programs, or programs supported in whole or in part by federal funds.

Party further certifies under pains and penalties of perjury that, as of the date that this Agreement is signed, Party is not presently debarred, suspended, nor named on the State's debarment list at: <a href="http://bgs.vermont.gov/purchasing/debarment">http://bgs.vermont.gov/purchasing/debarment</a>

**19. Certification Regarding Use of State Funds:** In the case that Party is an employer and this Agreement is a State Funded Grant in excess of \$1,001, Party certifies that none of these State funds will be used to interfere with or restrain the exercise of Party's employee's rights with respect to unionization.

State of Vermont – Attachment C Revised AHS – 9-3-2014